

**Physical Therapy Board of California**2005 Evergreen Street, Suite 1350, Sacramento, California 95815
Phone: (916) 561-8200 FAX : (916)263-2560 Internet: www.ptb.ca.gov**PHYSICAL THERAPIST ASSISTANT
APPLICATION FEE SCHEDULE**

(FEES SUBJECT TO CHANGE)

FULL NAME: _____ DATE: _____

ADDRESS: _____
STREET CITY STATE ZIP

SOCIAL SECURITY NUMBER: _____

Required Fees:

(Check boxes for fees submitted)

- ☐ **Application Processing Fee** \$75.00
Graduate of an Accredited PTA Program
The application processing fee is non-refundable and must be submitted with application.
- ☐ **Initial License Fee (ILF)** \$75.00
The ILF is required at time of application by all U.S. graduates

Non-California Resident Fee:

- ☐ **Fingerprint Card Processing Fee** \$51.00
The fingerprint card processing fee is only required if you submit the fingerprint card with your application.
If you are a resident of California, you are required to have your fingerprints processed via Live Scan.
(Refer to the fingerprinting instructions.)

Total: \$ _____**PLEASE MAKE YOUR CHECK OR MONEY ORDER PAYABLE TO THE PTBC
AND PAPER CLIP YOUR CHECK TO THE FEE SCHEDULE****FOR BOARD USE ONLY**

CASHIERING USE ONLY	RECEIPT NO.	PTA APP 12570023	PT ILF 12570026	FPC 99193701	
		\$75	\$75	\$51	

ATS # _____